



Aldrich CPAs + Advisors LLP

680 Hawthorne Avenue SE #140

Salem, Oregon 97301

**RECEIVED**

By the Regulatory Commission of Alaska on Jan 23, 2024

January 23, 2024

Regulatory Commission of Alaska  
701 West 8<sup>th</sup> Avenue, Suite 300  
Anchorage, Alaska 99501

Re: FCC Form 555, Annual Lifeline Eligible Telecommunications Carrier  
Certification

Dear Commissioners:

OTZ Telecommunications, LLC hereby submits a copy of its Annual Lifeline Eligible Telecommunications Carrier Certification Form for the reporting year ended December 31, 2023, as required by WC Docket 14-171 pursuant to 47 C.F.R § 54.416(b). Should you have any questions regarding this filing, do not hesitate to contact me.

Sincerely,

*m grassi*

Monica Grassi  
Aldrich CPAs + Advisors LLP  
Consultants for OTZ Telecommunications  
680 Hawthorne Avenue SE #140  
Salem, Oregon 97301  
(907) 365-2109, Fax (907) 522-2127  
mgrassi@aldrichadvisors.com

Cc: K. Williams, OTZ Telecommunications, LLC

**Annual Lifeline Eligible Telecommunications Carrier Certification Form** All carriers must complete all or portions of all sections Form must be submitted to USAC and filed with the Federal Communications Commission

## IMPORTANT: PLEASE READ INSTRUCTIONS FIRST

**Deadline: January 31st (Annually)**

619011	143018956	
Study Area Code (SAC)	Service Provider Identification Number (SPIN)	
(An Eligible Telecommunications Carrier (ETC) must provide a certification form for <b>each SAC</b> that provides Lifeline service).		
2023	AK	OTZ Telecommunications, Inc.
Recertification Year	State	ETC Name
		OTZ Telephone Cooperative, Inc.
DBA, Marketing, or Other Branding Name	Holding Company Name	
(If same as ETC name, list "N/A" Do <u>not</u> leave blank)	(If same as ETC name, list "N/A" Do <u>not</u> leave blank)	

**Does the reporting company have affiliated ETCs? Yes ☒ No ☐**

Provide a list of all ETCs that are affiliated with the reporting ETC, using page 4 and additional sheets if necessary. Affiliation shall be determined in accordance with Section 3(2) of the Communications Act. That Section defines "affiliate" as "a person that (directly or indirectly) owns or controls, is owned or controlled by, or is under common ownership or control with, another person." 47 U.S.C. § 153(2). See also 47 C.F.R. § 76.1200.

Affiliated ETC's SAC	Affiliated ETC's Name
613019	OTZ Telephone Cooperative, Inc.

**Initial Certification** *All ETCs must complete this section.*

I certify that the company listed above:

- Has policies and procedures in place to ensure that its Lifeline subscribers are eligible to receive Lifeline services; and
- Is in compliance with all federal Lifeline certification procedures; and
- Is in compliance with the minimum service levels set forth in 47 C.F.R. § 54.408.

I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial     KW    

**Annual Recertification Results**

Report the results of recertification efforts for the current calendar year.

*Do not leave blocks empty. If the National Verifier is responsible for conducting recertification, enter zero for blocks A - F. If the state Lifeline Administrator is responsible for conducting recertification, report the results for each block.*

A. Subscribers eligible for recertification within current calendar year	
B. Subscribers de-enrolled prior to recertification attempts	
C. Total number of subscribers required to be recertified (A-B)	
D. Subscribers successfully recertified	
E. Subscribers de-enrolled for failed recertification	
F. Percentage de-enrolled for failed recertification (E/C)	

I certify that the company listed above has procedures in place to recertify consumer eligibility by relying upon notice of eligibility from:      state Lifeline administrator   X   National Verifier

I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial     KW    

**No Subscribers Certification** *Complete this section if ETC claimed no Lifeline subscribers.*

I certify that my company did not claim federal low income support for the current Form 555 data year. I am an officer of the company named above. I am authorized to make this certification for the SAC(s) listed on this form

Initial

## ETCs Subject to the Non-Usage Requirements

All ETCs must complete the appropriate check-box. ETCs that do not assess and collect a monthly fee from their Lifeline subscribers are subject to the non-usage requirements. ETCs subject to the non-usage requirements must indicate the number of subscribers de-enrolled by month. ETCs that only assess a fee but do not collect such fees are subject to the non-usage requirements and must also indicate the number of subscribers de-enrolled by month.

Is the ETC subject to the non-usage requirements? Yes ☒ No ☐

If yes, record the number of subscribers de-enrolled for non-usage by month in Block H below.

G	H
Month	Subscribers De-Enrolled for Non-Usage
January	0
February	0
March	0
April	0
May	0
June	0
July	0
August	0
September	0
October	0
November	0
December	0
Total Subscribers	0

For purposes of this filing, an officer is an occupant of a position listed in the article of incorporation, articles of formation, or other similar legal document. An officer is a person who occupies a position specified in the corporate by-laws (or partnership agreement), and would typically be president, vice president for operations, vice president for finance, comptroller, treasurer, or a comparable position. If the filer is a sole proprietorship, the owner must sign the certification.

## Signature Block

By signing below, I certify that the information provided is true and accurate. I am an officer of the company named above. I am authorized to make this certification for this SAC.

Signed,

Kelly Williams

Signature of Officer

kwilliams@otz.org

Email Address of Officer

Amber Miller

Person Completing This Certification Form

Kelly Williams - Chief Executive Officer

Printed Name and Title of Officer

01-23-2024

Date

9075222170

Contact Phone Number